Alendronate in the prevention of osteoporosis: 7-year follow-up

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In a 3-year study followed by a 2-year open-label extension, alendronate sodium (ALN) maintained or increased bone mineral density (BMD) in 445 recently postmenopausal women with a spine BMD T-score > -2. In a second 2-year extension, 84 women previously treated with either 5 or 10 mg ALN daily during the first 3 years and 5 mg ALN during the first extension (group A) were randomized to either 5 mg ALN or placebo (PBO). Another group of 59 women (group B) received 20 mg ALN during the first 2 years, PBO during year 3, and were then followed up without treatment during years 4-7. In group A, continuous ALN treatment for 7 years increased spine and trochanter BMD by 2.7-4.1 and 3.3-4.2%, respectively, while femoral neck BMD was maintained. Patients initially receiving 10 mg ALN maintained total body BMD, whereas those treated with 5 mg ALN experienced a small but significant loss after 7 years. Among women who received ALN 5 mg during years 4-7, those who had been treated with ALN 10 mg